Fill in this information	to identify your case:	
Debtor 1	Dirone Troy Underwood	_
Debtor 2 (Spouse, if filing)	Cristie Marie Underwood	_
United States Bankru	ptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	_
	-14805	Check if this is:
(If known)		An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official Form	<u>106l</u>	MM / DD/ YYYY

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse				
If you have more than one job,	Employment status	■ Employed	■ Employed				
attach a separate page with information about additional	Employment status	☐ Not employed	☐ Not employed				
employers.	Occupation	Counter Clerk					
Include part-time, seasonal, or self-employed work.	Employer's name	Montgomery County Prothonotary	Pottstown Cluster of Religion				
Occupation may include student or homemaker, if it applies.	Employer's address	2 E Airy Street Norristown, PA 19401	57 N Franklin Street Pottstown, PA 19464				

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2,469.59 3,553.33 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 0.00 0.00 3. +\$ Calculate gross Income. Add line 2 + line 3. 2,469.59 3,553.33

Official Form 106I Schedule I: Your Income page 1

	tor 1 tor 2	Dirone Troy Underwood Cristie Marie Underwood			Case	e number ( <i>if known</i> )	_	19-1480	5		
	Copy line 4 here		4.		Fo \$	r Debtor 1		For Deb	ng sp		
	COL	y line 4 nere	4.		Ψ_	2,469.59	-	Ψ	3,3	33.33	-
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a		\$_	409.59	_	\$	6	93.01	_
	5b.	Mandatory contributions for retirement plans	5b		\$_	123.48	_	\$		0.00	-
	5c.	Voluntary contributions for retirement plans	50		\$_	0.00	_	\$		0.00	-
	5d. 5e.	Required repayments of retirement fund loans Insurance	50 5e		\$_ \$	0.00	_	\$		0.00	-
	5f.	Domestic support obligations	5f		\$ _	86.86 0.00	_	\$		41.02 0.00	-
	5g.	Union dues	5 <u>0</u>		\$	0.00	_	\$		0.00	-
	5h.	Other deductions. Specify:	-	).+	\$	0.00	_	· i — — —		0.00	-
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	619.93	-	\$	7	34.03	
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,849.66	_ ;	\$	2,8	19.30	-
8.	8b. 8c. 8d. 8e. 8f.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.  Interest and dividends  Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation  Social Security  Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.  Specify:  Pension or retirement income	80 80 86	o. d. e.	\$ \$ \$ \$ \$ \$ \$ \$	0.00 0.00 0.00 0.00 0.00	) ) ) )	\$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$		0.00 0.00 0.00 0.00 0.00	
	8h.	Other monthly income. Specify: Prorated Tax Refund (\$1966/12)		) ).+	\$_	163.83	_	\$		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	163.83		\$		0.00	)
10.	Calo	culate monthly income. Add line 7 + line 9.	10.	\$		2,013.49 +		2,819.	30 =	\$	4,832.79
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.					_			Ľ-	1,0020
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedul and contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are no cify:	ur depe					d in <i>Sche</i>	edule . 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certains						if it	12.	\$	4,832.79
13.	Do y	you expect an increase or decrease within the year after you file this form	m?							Combir nonthly	ned y income
		No. Yes. Explain:					—				

Official Form 106l Schedule I: Your Income page 2